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TRANSCRIPT

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Report

Digital Files Put Medical Records at Doctors' Fingertips

New technologies now allow doctors and hospitals to keep electronic health records, but the U.S. has been slow to switch formats. Susan Dentzer reports on the advantages and difficulties that some hospitals are facing in their efforts to digitize medical records.



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JUDY WOODRUFF: Now, bringing medical records into the 21st century. Susan Dentzer has our Health Unit report. The unit is a partnership with the Robert Wood Johnson Foundation.

SUSAN DENTZER, NewsHour Health Correspondent: Winona, Minnesota, on the banks of the upper Mississippi. You might not expect this rural community of 30,000 to be at the leading edge of technology, but when it comes to health care it is.

DR. CHARLES SHEPARD, Winona Health Community Memorial Hospital: Less pain, no nausea, which is an improvement.

SUSAN DENTZER: Dr. Charles Shepard is medical director here at Winona Health, the city's only hospital. He's part of an effort to vault U.S. health care into the modern era of information technology.

In the old days, Shepard would have been shuffling through a sheaf of paper to read a patient's medical record. Today, he's doing it by computer.

DR. CHARLES SHEPARD: We have an ultrasound, a gallbladder yesterday, and I can see the report here. Thin walls, no stones.

SUSAN DENTZER: Moments later, when Shepard visits the patient, suffering from an inflammation of the pancreas, he has all the critical information at his command.

DR. CHARLES SHEPARD: You know, the two pancreatic enzymes that we're tracking, amylase was 620 when you came in, and it's down to 130. We've never had so much information at our fingertips as we do right now.

Test bed for new system

SUSAN DENTZER: In fact, when it comes to health information technology, Winona is light years ahead of much of U.S. health care. For each patient in the community, the hospital and the doctors' offices here share a common electronic health record.

DR. WILLIAM DAVIS, Family Medicine Specialist: A Mrs. Spencer has requested a refill of her thyroid medicine.

SUSAN DENTZER: There are fewer worries these days about doctor's illegible handwriting, since those like family medicine specialist William Davis now e-prescribe, e-mailing prescriptions directly to pharmacies for instant dispensing.

DR. WILLIAM DAVIS: All I need to do at this point then is to sign that and the prescription goes directly to the pharmacy. And it's been sent.

SUSAN DENTZER: And patients like Richard Etnier, who has diabetes and was born with heart defects, can access their records, view their lab test results, or communicate with providers from their home computers.

RICHARD ETNIER, Patient: Doctors and nurses do a great job, but they're always so busy. This is a lot better, because you can e-mail them and, say, ask a question or even check your medical records.

SUSAN DENTZER: All this is in stark contrast to much of U.S. health care, where only about 1 in 4 hospitals and 1 in 5 physician's offices are using electronic health records. That's despite a call from President Bush that every

Americans have access to electronic health records by 2014.

GEORGE W. BUSH, President of the United States: We will make wider use of electronic records and other health information technology to help control costs and reduce dangerous medical errors.

SUSAN DENTZER: But with rare exceptions like Winona, the U.S. is still about a dozen years behind other industrialized countries like Britain in its use of health information technology.

Michael Leavitt, secretary of the Department of Health and Human Services, acknowledges that progress has been too slow.

MIKE LEAVITT, Health and Human Services Secretary: Health care is a sector of our economy that has not had the advantage of information technology. And as a result, it's a system that is saturated with inefficiency. And it can and must change.

SUSAN DENTZER: Winona managed to leapfrog much of the rest of the country through a partnership with Cerner Corporation. That's a Kansas City-based leading supplier of health information technology solutions.

Trace DeVanny is the company's president. He says Cerner picked Winona in the late-1990s as a place to test its so-called personal health records for patients to keep track of their health information.

TRACE DEVANNY, President, Cerner Corporation: Health care has been delivered very much the same way for the last thousand years. In order to change it, you've got to create an electronic version of that information.

And Winona actually fit the bill: They had a very forward-thinking leadership and a group of clinicians that were very anxious to change health status.

SUSAN DENTZER: What's more, Winona's local cable TV company, Hiawatha Broadband, had already wired up nearly two-thirds of the households in the community for the Internet. That was a level almost unheard of back then.

So Cerner launched an initial test to learn more about how this technology would really work in communities. What followed offers a reality check on the promises and pitfalls of adopting it.

After rocky start, system took off

SUSAN DENTZER: Family medicine specialist Davis, who was an early technology enthusiast, told us what happened when Cerner first equipped some households with personal health records.

DR. WILLIAM DAVIS: I think the vision of personal health records was something that the patient would put their own information in, so they would get on, and they'd enter their problem list, and enter their surgeries, and enter their medications, and take their blood pressure and put it in there. And it turned out that very few people wanted to take the time to do that.

SUSAN DENTZER: But what many patients wanted, says Davis, wasn't access to a separate store of information they created themselves, but rather to the actual records doctors kept in their offices, in digital form. Some doctors in the community wanted that, too, but others were way behind the technology curve.

DR. WILLIAM DAVIS: There are probably a third of the medical staff who had never used a computer, didn't know how to turn one on, didn't know what a mouse was.

SUSAN DENTZER: The same thing was true of Winona's 99-bed hospital, says Rachelle Schultz, CEO of Winona Health.

RACHELLE SCHULTZ, President and CEO, Winona Health: This organization prior to doing this probably had about three computers in the entire organization. So we didn't have staff that worked on Word, you know, or did e-mail, or knew how to do any of those kinds of things. It was nonexistent.

SUSAN DENTZER: Despite the obstacle, Cerner went to work building the new electronic health record for Winona. After months of planning and training, the system went live in 2003.

Over time, it needed fine-tuning. But now, five years later, we found no health care provider in Winona willing to return to the day of paper health records.

A key example came last year, when a community near Winona flooded amid torrential summer rains. Shades of Hurricane Katrina, dozens of homes, Winona's health clinic, the local pharmacy, and other businesses were all destroyed.

RACHELLE SCHULTZ: All these people that were being pulled out of their homes, they're on diabetic medication or blood pressure medication. We could pull up their records. We knew exactly what medications they were on, dosing and so forth. We could fill them all and shuttle them all back down so everybody had their medication.

SUSAN DENTZER: Winona's doctors say health information technology has also helped them grapple with a complexity of modern medicine and the need to reliably do the right things for patients 100 percent of the time.

Take the new computerized system in Winona's health emergency room for processing physicians' orders. Those are doctors' detailed directions for what should be done for patients.

RACHELLE SCHULTZ: Physicians, instead of writing things down on a prescription pad or writing orders on a sheet of paper, whatever, are actually directly entering in what they want done for this patient. And it could be a set of anywhere from, you know, 15 to 20 different kinds of things.

SUSAN DENTZER: So emergency room chief Dr. Carlos Morales can now view standardized lists of instructions, for example, for people with apparent heart attacks. He selects those he wants, then sends them instantly all over the hospital to nurses, to the lab, to radiology.

DR. CHARLES MORALES, Winona Health Community Memorial Hospital: Vital signs, EKGs, I.V. fluids, medications, and we just pretty much click on all of the medications that we want, all of the vital signs, all of the x-rays. We sign them, and everything goes.

RACHELLE SCHULTZ: It's easy to read. It's easy to understand. It can be very clear. You don't have to do a lot of callbacks, "Did you really mean this? I can't really tell what you wrote here." It has huge savings in clarity and takes a lot of errors or potential for a lot of errors out of the system.

Widespread adoption encouraged

SUSAN DENTZER: If there are any regrets in Winona today, it's that these systems can't do more and that more patients aren't taking advantage of them. Although anybody in Winona can access his or her records electronically, only 1 in 10 is actually doing so. Etnier told us he thought some of the non-users might be concerned about the privacy of their health information.

RICHARD ETNIER: I worried about it at first, but then they told me that you have your own private password. Nobody knows that. Nobody can get in there, so that really does help.

SUSAN DENTZER: Another problem is that, when Winona patients need even more intensive health care and are referred to places like the nearby Mayo Clinic, their electronic health records aren't directly transferable. That's because Winona's and Mayo's separate health information systems are not compatible or, as it's called, interoperable.

MICHAEL LEAVITT: If you're going to have a national railroad, all the rail gauges need to line up. We've had many different people who have been developing health care systems that are electronic, but they've been using different standards so the computers couldn't talk to each other.

SUSAN DENTZER: So will the lessons from Winona translate back to Washington and a far bigger push from government to extend electronic health records nationwide? Many health experts hope so.

With nudging from the Bush administration, companies like Cerner and other stakeholders are slowly working their way toward national interoperability standards.

Leavitt saying Medicare will soon begin testing ways to pay small physician practices more to use these systems, and Congress is likely to continue debating whether the U.S. is doing enough to harness information in overhauling American health care.

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